

**FILED**  
APR 04 2022  
CLERK, U.S. DISTRICT COURT  
WESTERN DISTRICT OF TEXAS  
DEPUTY

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature x <i>Kim Hogan</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Kim Hogan</i> C. Date of Delivery <i>4-4-22</i></p> <p>D. Is delivery address different from item? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to: <i>Kimberly D. Hogan</i> <i>10015 Lake Creek Parkway</i> <i>#681</i> <i>Austin, TX 78729</i></p>		<p>APR 4 2022</p> <p>CLERK, U.S. DISTRICT COURT WESTERN DISTRICT OF TEXAS DEPUTY</p>	
<p>2. Article Number (Transfer from service label) <i>7021 1970 0001 4483 6762</i></p>		<p>3. Service-type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	

9590 9402 7006 1225 8034 84  
*1:21-cv-892* *PR # 15*

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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